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Bib Data Sheet

CONFIRMATION NO. 4324

SERIAL NUMBER 10/668,805	FILING DATE 09/24/2003  RULE	CLASS 433	GROUP ART UNIT 3732	ATTORNEY DOCKET NO. IMP-102
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## APPLICANTS

Maurice Valen, Holliswood, NY;

\*\* CONTINUING DATA \*\*\*\*\*

*none cos*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*none cos*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 12/16/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 2	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged <i>Candice Stokes</i> Examiner's Signature Initials				

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## TITLE

Universal, multifunctional, single unit, rotary osteotome

FILING FEE  RECEIVED 456	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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